Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF FLORIDA	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	About	Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Donald First name W. Middle name Cogswell Last name and Suffix (Sr., Jr., II, III)	First na	
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8532		

Debtor 1 Donald W. Cogswell Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs		
5.	Where you live	19864 Cobblestone Circle	If Debtor 2 lives at a different address:		
		Venice, FL 34292-4184 Number, Street, City, State & ZIP Code Sarasota	Number, Street, City, State & ZIP Code		
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Debtor 1 Donald W. Cogswell		Case number (if known)							
Par	t 2:	Tell the Court About	our Bankr	uptcy Ca	ase				
7.	Banl	chapter of the cruptcy Code you are psing to file under			orief description of each, see <i>N</i> go to the top of page 1 and ch			(b) for Individuals Filir	ng for Bankruptcy
	CHOC	ising to me under	■ Chapte	er 7					
			☐ Chapte	er 11					
			☐ Chapte	er 12					
			☐ Chapte	er 13					
8.	How	you will pay the fee	abor orde a pro	ut how your er. If your e-printed	e entire fee when I file my pet ou may pay. Typically, if you are attorney is submitting your pay address.	e paying the forment on your	ee yourself, you may behalf, your attorne	pay with cash, cashie may pay with a cred	r's check, or money it card or check with
	☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application The Filing Fee in Installments (Official Form 103A).					ch the Application for	Individuals to Pay		
			☐ I red but i appl	quest that s not req ies to you	at my fee be waived (You may uired to, waive your fee, and m ur family size and you are unab	request this of ay do so only ole to pay the	if your income is les fee in installments). I	s than 150% of the off f you choose this optic	ficial poverty line that on, you must fill out
			tne i	<i>Арриса</i> й	on to Have the Chapter 7 Filing	ree waived	(Oπiciai Form 103B)	and file it with your pe	etition.
9.		lave you filed for	■ No.						
		ruptcy within the 8 years?	☐ Yes.						
				District		When	C	ase number	
				District		When	C	ase number	
				District		When	C	ase number	
10.		any bankruptcy s pending or being	■ No						
	filed not f you,	by a spouse who is iling this case with or by a business ner, or by an	☐ Yes.						
				Debtor			Re	lationship to you	
				District		When	Ca	se number, if known	
				Debtor	-			lationship to you	
				District		When	Ca	se number, if known	
11.		ou rent your lence?	■ No.	Go to I	ine 12.				
	. 00.0		☐ Yes.	Has yo	our landlord obtained an evictio	n judgment a	gainst you?		
					No. Go to line 12.				
					Yes. Fill out <i>Initial Statement</i> this bankruptcy petition.	About an Evid	ction Judgment Again	st You (Form 101A) a	nd file it as part of

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Deb	otor 1 Donald W. Cogsw	rell		Case number (if known)
Par	Report About Any Bu	ısinesses	You Own as a So	ple Proprietor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and loca	ration of business
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of busing	ness, if any
	If you have more than one sole proprietorship, use a		Number, Stree	et, City, State & ZIP Code
	separate sheet and attach it to this petition.		Check the app	propriate box to describe your business:
	n to time position.			Care Business (as defined in 11 U.S.C. § 101(27A))
				Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
				proker (as defined in 11 U.S.C. § 101(53A))
			_	nodity Broker (as defined in 11 U.S.C. § 101(6))
				of the above
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> <i>debtor?</i> For a definition of <i>small</i> <i>business debtor</i> , see 11 U.S.C. § 101(51D).	deadline operation	es. If you indicate the set of th	oter 11, the court must know whether you are a small business debtor so that it can set appropriate that you are a small business debtor, you must attach your most recent balance sheet, statement of ement, and federal income tax return or if any of these documents do not exist, follow the procedure under Chapter 11. Ider Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing unde	ler Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	· Have Any	y Hazardous Prop	perty or Any Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is	■ No.		
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazar	ard?
	public health or safety? Or do you own any property that needs immediate attention?		If immediate atter needed, why is it	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the prop	perty?
	- ,			Number, Street, City, State & Zip Code

Debtor 1 Donald W. Cogswell

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Do	nald W. Cogsw	ell		Case number	(if known)			
Par	t 6: Ans	wer These Questi	ons for Repo	rting Purposes					
16.	What kin	d of debts do		e your debts primarily consur dividual primarily for a personal,		ed in 11 U.S.C. § 101(8) as "incurred by an			
				No. Go to line 16b.					
				☐ Yes. Go to line 17.					
				Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
				No. Go to line 16c.					
				Yes. Go to line 17.					
			16c. St	ate the type of debts you owe th	at are not consumer debts or business	debts			
17.	Are you Chapter	filing under 7?	□ No. I a	m not filing under Chapter 7. Go	o to line 18.				
	after any property	estimate that exempt is excluded and rative expenses	ar	e paid that funds will be available	u estimate that after any exempt prope e to distribute to unsecured creditors?	rty is excluded and administrative expenses			
	are paid	that funds will		No					
		vailable for ibution to unsecured itors?		Yes					
18.	How mai	ny Creditors do	■ 1-49		□ 1,000-5,000	□ 25,001-50,000			
	you estir	you estimate that you owe?	☐ 50-99		□ 5001-10,000	5 0,001-100,000			
			□ 100-199 □ 200-999		10,001-25,000	☐ More than100,000			
19.		ch do you	□ \$0 - \$50,0	000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
		estimate your assets to be worth?	\$50,001 -		□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
			■ \$100,001 □ \$500,001	' '	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.		ch do you	□ \$0 - \$50,0	000	■ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate to be?	your liabilities	□ \$50,001 □ \$100,001		□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion			
			□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
Par	t 7: Sign	n Below							
For	you		I have exam	ned this petition, and I declare ι	under penalty of perjury that the information	ation provided is true and correct.			
					n aware that I may proceed, if eligible, unvailable under each chapter, and I cho	under Chapter 7, 11,12, or 13 of title 11, ose to proceed under Chapter 7.			
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						an attorney to help me fill out this			
			I request reli	ef in accordance with the chapte	er of title 11, United States Code, speci	fied in this petition.			
			bankruptcy of and 3571.	ase can result in fines up to \$25	ealing property, or obtaining money or 50,000, or imprisonment for up to 20 ye	property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519,			
			/s/ Donald W. Signature of		Signature of Debtor	2			
			Executed on	June 29, 2018	Executed on				
				MM / DD / YYYY		DD / YYYY			

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Debtor 1 Donald W. Cogsv	vell	Cas	se number (if known)			
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, United for which the person is eligible. I also certify tha	States Code, and have e t I have delivered to the o	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)			
If you are not represented by an attorney, you do not need to file this page.						
. •	/s/ Christopher D. Smith	Date	June 29, 2018			
	Signature of Attorney for Debtor		MM / DD / YYYY			
	Christopher D. Smith 605433					
	Printed name					
	Christopher D. Smith P.A.					
	Firm name					
	5391 Lakewood Ranch Blvd N STE 203					
	Sarasota, FL 34240					
	Number, Street, City, State & ZIP Code					
	Contact phone 941-907-4774	Email address	smith@ChrisSmith.com			
	605433 FL					
	Bar number & State					

			Ç		
Fill	in this information to identify	y your case:			
Deb	tor 1 Donald W. (Cogswell Middle Name	Last Name		
Deb	tor 2	Widdle Name	Edit Name		
(Spot	rise if, filing) First Name	Middle Name	Last Name		
Unit	ed States Bankruptcy Court fo	or the: MIDDLE DISTRIC	T OF FLORIDA		
Cas (if kno	e number 			_	ck if this is an ended filing
	icial Form 106Su		s and Certain Statistical Information		12/15
Be a	s complete and accurate as mation. Fill out all of your so original forms, you must fill	possible. If two married p chedules first; then compl I out a new <i>Summary</i> and	eople are filing together, both are equally responsible flete the information on this form. If you are filing amend check the box at the top of this page.		ring correct
					assets e of what you own
1.	Schedule A/B: Property (Of 1a. Copy line 55, Total real ex			\$_	485,800.00
	1b. Copy line 62, Total person	onal property, from Schedule	e A/B	\$	2,550.00
	1c. Copy line 63, Total of all p	property on Schedule A/B		\$	488,350.00
Part	2: Summarize Your Liabil	lities			
					liabilities unt you owe
2.	Schedule D: Creditors Who F 2a. Copy the total you listed i		operty (Official Form 106D) im, at the bottom of the last page of Part 1 of Schedule D	\$	432,198.00
3.	Schedule E/F: Creditors Who 3a. Copy the total claims from		Official Form 106E/F) I claims) from line 6e of <i>Schedule E/F</i>	\$	1,300.00
	3b. Copy the total claims from	m Part 2 (nonpriority unsect	ured claims) from line 6j of Schedule E/F	\$	1,182,202.00
			Your total liabilities	\$	1,615,700.00
Part	3: Summarize Your Incom	me and Expenses			
4.	Schedule I: Your Income (Off Copy your combined monthly		nedule I	\$	5,442.48
5.	Schedule J: Your Expenses (Copy your monthly expenses	(Official Form 106J) s from line 22c of S <i>chedule</i> .	J	\$	8,748.25
Part	4: Answer These Question	ons for Administrative and	Statistical Records		
6.	Are you filing for bankrupto No. You have nothing to		or 13? orm. Check this box and submit this form to the court with yo	our other s	chedules.
7.	■ Yes What kind of debt do you h	ave?			
	☐ Your debts are primari	ily consumer debts. Consu	umer debts are those "incurred by an individual primarily for	a person:	al, family, or

household purpose." 11 Ú.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Dept	tor 1	Donald W. Cogswell	Case number (If known)	
		n the Statement of Your Current Monthly Income: Copy 1-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Lin		\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clain	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	1,300.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	1,300.00

Fill in this info	rmation to identify your	case and this filing	g:			
Debtor 1	Donald W. Cogsw					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
		MIDDLE DISTRIC				
Omica ciatos E	sammapley Countries and					
Case number					☐ Check if this is an amended filing	
Official F	orm 106A/B					
Schedu	le A/B: Prop	erty			12/15	
Part 1: Describ 1. Do you own of No. Go to P	estion. ne Each Residence, Building r have any legal or equitable	, Land, or Other Real	his form. On the top of any additional pages, Estate You Own or Have an Interest In ence, building, land, or similar property?	write your name and case	number (if known).	
1.1 19864 Cobblestone Circle Street address, if available, or other description		What	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.		
			Manufactured or mobile home	Current value of the	Current value of the	
Venice		92-4184	Land	entire property?	portion you own?	
City	State Z	ZIP Code	Investment property Timeshare Other has an interest in the property? Check one	\$485,800.00 Describe the nature of you (such as fee simple, tenda a life estate), if known.		
			Debtor 1 only	Fee simple		
Sarasota County	1	prop		Check if this is com (see instructions)	munity property	
pages you Part 2: Describ Do you own, le someone else d	have attached for Part 1. be Your Vehicles ase, or have legal or equ	Write that numbe	your entries from Part 1, including any r here	d or not? Include any ve	\$485,800.00 ehicles you own that	
■ No						
☐ Yes						

Debtor 1	Donald W. Cogswell	Case number (ii	f known)
	craft, aircraft, motor homes, ATVs and other recreating values: Boats, trailers, motors, personal watercraft, fishing values.		es
■ No			
☐ Yes			
	he dollar value of the portion you own for all of your s you have attached for Part 2. Write that number he		
Part 3:	Describe Your Personal and Household Items		
·	own or have any legal or equitable interest in any of	the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>Exam</i> □ No	chold goods and furnishings ples: Major appliances, furniture, linens, china, kitchenw s. Describe	vare	
		e and chairs, dining room and chairs, es, end tables, lamps, linens, dishes, its and photos.	\$750.00
□ No	 ples: Televisions and radios; audio, video, stereo, and dincluding cell phones, cameras, media players, gas. Describe 6 TV's, laptop computer, 4 de 	mes	\$250.00
Exam ■ No	tibles of value ples: Antiques and figurines; paintings, prints, or other a other collections, memorabilia, collectibles s. Describe	rtwork; books, pictures, or other art objects; stan	np, coin, or baseball card collections;
Exam	ment for sports and hobbies ples: Sports, photographic, exercise, and other hobby exercise and other hobby exercise instruments s. Describe	quipment; bicycles, pool tables, golf clubs, skis; (canoes and kayaks; carpentry tools;
□ No	nples: Pistols, rifles, shotguns, ammunition, and related	equipment	
■ Ye	s. Describe		
	1 22 rifle, 2 handguns		\$300.00
□ No	nes mples: Everyday clothes, furs, leather coats, designer we s. Describe	ear, shoes, accessories	
	clothes and shoes		\$100.00

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Debtor 1	Donald W. Cogswe	II	Case number (if kn	own)
□ No		ostume jewelry, enga	gement rings, wedding rings, heirloom jewelry, watches, ger	ns, gold, silver
	wedd	ling ring		\$150.00
<i>Exam</i> ■ No	arm animals aples: Dogs, cats, birds, ho	orses		
■ No	ther personal and house. Give specific information	-	not already list, including any health aids you did not li	st
			Part 3, including any entries for pages you have attached	\$1,550.00
	escribe Your Financial Asse wn or have any legal or		any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No □ Yes. 17. Depos	sits of money	or other financial acco	ome, in a safe deposit box, and on hand when you file your pounts; certificates of deposit; shares in credit unions, brokens with the same institution, list each.	
□ No ■ Yes.			Institution name:	
	17.1.	Checking	Chase Bank	\$1,000.00
	17.2.	Savings	Chase Bank	\$0.00
	17.3.	Checking	Chase Bank	\$0.00
	17.4.	Savings	Chase Bank	\$0.00
	s, mutual funds, or publi aples: Bond funds, investm		okerage firms, money market accounts	
		Institution or issuer	name:	
	oublicly traded stock and venture	I interests in incorp	orated and unincorporated businesses, including an int	erest in an LLC, partnership, and
	. Give specific information	about them	 % of ownership:	

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De	ebtor 1	Donald W. Cogswell	Case nun	nber (if known)
20.	Negoti Non-ne ■ No	ament and corporate bonds and other negotiable able instruments include personal checks, cashiers' egotiable instruments are those you cannot transfer to	checks, promissory notes, and money orde	rs.
	⊔ Yes.	Give specific information about them Issuer name:		
	Examµ ■ No	nent or pension accounts les: Interests in IRA, ERISA, Keogh, 401(k), 403(b),	thrift savings accounts, or other pension or	profit-sharing plans
	☐ Yes.	List each account separately. Type of account:	Institution name:	
22.	Your s	y deposits and prepayments hare of all unused deposits you have made so that y eles: Agreements with landlords, prepaid rent, public		
			Institution name or individual:	
23.	Annuit ■ No	ies (A contract for a periodic payment of money to yo	u, either for life or for a number of years)	
	☐ Yes	Issuer name and description.		
24.		s in an education IRA, in an account in a qualified S. §§ 530(b)(1), 529A(b), and 529(b)(1).	d ABLE program, or under a qualified sta	ate tuition program.
	Yes	Institution name and description. Sepa	rately file the records of any interests.11 U	.S.C. § 521(c):
	■ No	equitable or future interests in property (other the Give specific information about them	an anything listed in line 1), and rights o	or powers exercisable for your benefit
26.		s, copyrights, trademarks, trade secrets, and other less: Internet domain names, websites, proceeds from		
	_	Give specific information about them		
27.		es, franchises, and other general intangibles oles: Building permits, exclusive licenses, cooperative	association holdings, liquor licenses, profe	essional licenses
	☐ Yes.	Give specific information about them		
M	oney or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you		
		Give specific information about them, including whet	ner you already filed the returns and the tax	; years
	Examµ ■ No	support les: Past due or lump sum alimony, spousal support Give specific information	child support, maintenance, divorce settle	ment, property settlement
30.	Exam _l	amounts someone owes you bles: Unpaid wages, disability insurance payments, d benefits; unpaid loans you made to someone el		orkers' compensation, Social Security
	■ No □ Yes.	Give specific information		

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Debtor 1	Donald W. Cogswell	Case number (if known)	
	ests in insurance policies nples: Health, disability, or life insurance; health savings account (HSA); cred	it, homeowner's, or renter's insura	ance
■ Yes	s. Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
	State Farm Term life	Barbara Cogswell	\$0.00
If you	nterest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance poenne has died.	licy, or are currently entitled to red	ceive property because
☐ Yes	s. Give specific information		
Exan □ No -	ns against third parties, whether or not you have filed a lawsuit or made inples: Accidents, employment disputes, insurance claims, or rights to sue	a demand for payment	
■ Yes	s. Describe each claim		
	Lawsuit against Spot Link LLC for v	vrongful termination	Unknown
35. Any f ■ No □ Yes	inancial assets you did not already list Give specific information		
	I the dollar value of all of your entries from Part 4, including any entries Part 4. Write that number here		\$1,000.00
Part 5: D	escribe Any Business-Related Property You Own or Have an Interest In. List any	real estate in Part 1.	
No. 0	own or have any legal or equitable interest in any business-related property? Go to Part 6. Go to line 38.		
	Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an you own or have an interest in farmland, list it in Part 1.	n Interest In.	
■ No	ou own or have any legal or equitable interest in any farm- or commercia b. Go to Part 7. es. Go to line 47.	l fishing-related property?	
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not List Al	pove	
Exan	ou have other property of any kind you did not already list? Inples: Season tickets, country club membership S. Give specific information		

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Debtor 1	Donald W. Cogswell		_	Case number (if known)	
Part 8:	List the Totals of Each Part of this Form				
55. Part	1: Total real estate, line 2				\$485,800.00
56. Part	2: Total vehicles, line 5		0.00	_	
57. Part	3: Total personal and household items, line 15	\$1,5	50.00		
58. Part	4: Total financial assets, line 36	\$1,0	00.00		
59. Part	5: Total business-related property, line 45		0.00		
60. Part	6: Total farm- and fishing-related property, line 52	:	0.00		
61. Part	7: Total other property not listed, line 54	+	0.00		
62. Total	personal property. Add lines 56 through 61	\$2,5	50.00	Copy personal property total	\$2,550.00
63. Total	of all property on Schedule A/B. Add line 55 + line 62				\$488,350.00

						_
Fil	I in this informa	tion to identify your c	ase:			
De	btor 1	Donald W. Cogswo				
De	btor 2	First Name	Middle Name	L	ast Name	
	ouse if, filing)	First Name	Middle Name	L	ast Name	
Un	ited States Bank	ruptcy Court for the:	MIDDLE DISTRICT OF FL	ORIDA	<u> </u>	
Ca	se number					
	nown)					☐ Check if this is an amended filing
Oí	fficial Forr	n 106C				
S	chedule	C: The Pro	perty You Cl	aim	as Exempt	4/16
the nee	property you liste	ed on <i>Schedule A/B: Pr</i> attach to this page as m	roperty (Official Form 106A/	B) as yo	our source, list the property that you	r supplying correct information. Using claim as exempt. If more space is additional pages, write your name and
spe any iun exe	cific dollar amo applicable stat ds—may be unl mption to a par	ount as exempt. Altern utory limit. Some exer imited in dollar amour	atively, you may claim the mptions—such as those f nt. However, if you claim a	e full fa for heal an exer	th aids, rights to receive certain b nption of 100% of fair market valu	ing exempted up to the amount of enefits, and tax-exempt retirement
		the Property You Clai	m as Exempt			
				ven if vo	our spouse is filing with you.	
	_		nonbankruptcy exemptions.	•	, , ,	
	_	-	s. 11 U.S.C. § 522(b)(2)	11 0.0	5.0. 3 022(0)(0)	
2		,		wamant	fill in the information below	
۷.		ty you list on Schedu of the property and line	Specific laws that allow exemption			
		at lists this property	on Current value of the portion you own	• •		opecine laws that allow exemption
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
		estone Circle Venic	e, FL \$485,800.00		100%	Fla. Const. art. X, § 4(a)(1);
	HOMESTEAD Line from Sche				100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. §§ 222.01 & 222.02
		ets, kitchen table ar			\$750.00	Fla. Const. art. X, § 4(a)(2)
tables, lamps,		s, 2 couches, end s, linens, dishes, po sc wall prints and			100% of fair market value, up to any applicable statutory limit	
		o computer, 4 deskt	tops \$250.00	<u> </u>	\$250.00	Fla. Const. art. X, § 4(a)(2)
	LINE HUIH SCHE	Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
	Checking: Ch		\$1,000.00	<u> </u>	75%	Fla. Stat. Ann. § 222.11(2)(a)

☐ 100% of fair market value, up to any applicable statutory limit

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Эе	btor 1 Donald W. Cogswell		Case number (if known)					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Check only one box for each exemption.					
	State Farm Term life Beneficiary: Barbara Cogswell	\$0.00	100%	Fla. Stat. Ann. § 222.14				
	Line from Schedule A/B: 31.1		100% of fair market value, up to any applicable statutory limit					
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			t.)				
	■ No							
	☐ Yes. Did you acquire the property cover	Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?						
	□ No							
	☐ Yes							

Fill in this informat	ion to identify you	ır case:			
_	Donald W. Cogs	Middle Name Last Name			
Debtor 2					
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Bankr	uptcy Court for the:	MIDDLE DISTRICT OF FLORIDA			
Case number					
(if known)				☐ Check	if this is an
				amend	ed filing
Official Form	1060				
Official Form		W/			
Schedule D	: Creditors	Who Have Claims Secure	ed by Property	<u>/</u>	12/15
		If two married people are filing together, both are eout, number the entries, and attach it to this form.			
1. Do any creditors ha	ve claims secured by	y your property?			
☐ No. Check th	is box and submit t	his form to the court with your other schedules.	You have nothing else to	report on this form.	
_	of the information	•	3	•	
	ecured Claims	bolow.			
•		more than one secured claim, list the creditor separate	Column A	Column B	Column C
for each claim. If more	than one creditor has	a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
much as possible, list t	he claims in alphabeti	cal order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Suntrust Ba	nk	Describe the property that secures the claim:	\$59,917.00	\$485,800.00	\$0.00
Creditor's Name		19864 Cobblestone Circle Venice,			
		FL 34292-4184 Sarasota County HOMESTEAD, keep			
Po Box 1438	1	As of the date you file, the claim is: Check all that			
Sarasota, FL		apply. □ Contingent			
Number, Street, Cit	y, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who owes the debt?	? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		An agreement you made (such as mortgage or so car loan)	ecured		
Debtor 2 only	Oh.	,			
☐ Debtor 1 and Debto	•	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
☐ Check if this claim		☐ Other (including a right to offset)			
community debt		· · · · · · · · · · · · · · · · · · ·			
	Opened				
	07/13 Last				
Data daht was insure	Active ed 2/27/18	Last 4 digits of account number 1971			
Date debt was incurre	2/2//10	Last 4 digits of account number			
2.2 US Bank Ho	me Mortgage	Describe the property that secures the claim:	\$372,281.00	\$485,800.00	\$0.00
Creditor's Name	inc mortgage	19864 Cobblestone Circle Venice,	Ψ012,201.00	Ψ+00,000.00	Ψ0.00
		FL 34292-4184 Sarasota County			
		HOMESTEAD, keep As of the date you file, the claim is: Check all that			
4801 Freder		apply.			
Owensboro,		Contingent			
Number, Street, Cit	y, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt?	? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		An agreement you made (such as mortgage or s	ecured		
Debtor 2 only		car loan)			
Debtor 1 and Debto	•	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the o	debtors and another	☐ Judgment lien from a lawsuit			

Official Form 106D

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Debtor 1 Donald W. Cogswell			Case number (if know)			
First Name	Middle N	ame Last Name		_		
☐ Check if this claim community debt	relates to a	☐ Other (including a right to offset)				
Date debt was incurre	Opened 02/13 Last Active 3/05/18	Last 4 digits of account number	7915			
	ge of your form, add	column A on this page. Write that number he the dollar value totals from all pages.	nere:	\$432,198.00 \$432,198.00	7	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

					_	1	
Fill in this	s information to identify your	case:					
Debtor 1	Donald W. Cogsv	Well Middle Name	Last Nam				
Debtor 2							
(Spouse if, fil	ing) First Name	Middle Name	Last Name	Э			
United Sta	ates Bankruptcy Court for the:	MIDDLE DISTR	ICT OF FLORIDA				
Case num	nber						
(if known)						_	t if this is an
] ameno	ded filing
Official	Form 106E/F						
Sched	ule E/F: Creditors V	Vho Have Ur	nsecured Claim	S			12/15
Schedule G Schedule D left. Attach name and c Part 1:	ory contracts or unexpired leases: Executory Contracts and Unexpired Claims Set the Continuation Page to this parase number (if known). List All of Your PRIORITY Universely unsecured to the continuation of the continuation of the contract of the contrac	pired Leases (Officia cured by Property. If ge. If you have no in nsecured Claims	Il Form 106G). Do not inclumore space is needed, co formation to report in a Pa	ide any cr py the Pai	editors with partially s rt you need, fill it out,	secured claims that number the entries	are listed in in the boxes on the
	Go to Part 2.	eu ciainis against yo	ur				
■ Yes							
possible Part 1.	what type of claim it is. If a claim he, list the claims in alphabetical ord If more than one creditor holds a per explanation of each type of claim,	ler according to the cr articular claim, list the	editor's name. If you have mother creditors in Part 3.	ore than to			
2.1 IF	RS	Last 4	digits of account number	8532	\$1,300.00	\$1,300.00	\$0.00
	riority Creditor's Name O Box 7346	When	was the debt incurred?	2017			
Р	hiladelphia, PA 19101-734		was the dest mountain	2017		_	
	umber Street City State Zlp Code incurred the debt? Check one.		he date you file, the claim	is: Check	all that apply		
			ntingent				
	ebtor 1 only		iquidated				
_	ebtor 2 only	☐ Dis	puted of PRIORITY unsecured cla	ıim:			
_	ebtor 1 and Debtor 2 only	П-	mestic support obligations				
	least one of the debtors and anoth	01	-	41-			
	heck if this claim is for a commu claim subject to offset?		kes and certain other debts your image.		-		
■ N	-		ner. Specify	ary willoy	od word intoxidated		
☐ Ye	es	_ = 0	Income tax	(-
Part 2:	List All of Your NONPRIORI	TV Unsecured Cla	ime				
	creditors have nonpriority unse						
	You have nothing to report in this	J	•	schedules			
■ Yes			12 11.0 Court Man your officer				
unsecu	l of your nonpriority unsecured c ured claim, list the creditor separate ne creditor holds a particular claim,	ly for each claim. For	each claim listed, identify when the same claim listed, identify when the same claim.	nat type of	claim it is. Do not list cl	aims already included	l in Part 1. If more

Total claim

Debtor	1 Donald W. Cogswell	Case number (if know)					
4.1	American Express	Last 4 digits of account number	2913	\$47,599.00			
	Nonpriority Creditor's Name P.o. Box 981537 El Paso, TX 79998	When was the debt incurred?	Opened 10/10 Last Active 9/10/15				
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
☐ De ☐ De ☐ At ☐ C h	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt	☐ Student loans	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:				
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	ration agreement or divorce that you did not				
	□ Yes	Other. Specify Business d					
4.2	American Express	Last 4 digits of account number	6533	\$19,079.00			
	P.o. Box 981537 El Paso, TX 79998	When was the debt incurred?	Opened 11/14 Last Active 9/10/15				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset?	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	d claim: ration agreement or divorce that you did not				
	■ No		rofit-sharing plans, and other similar debts				
	Yes	Ongoing La personal gu	awsuit - Business debt with uarantee				
4.3	Bank of America Nonpriority Creditor's Name	Last 4 digits of account number	1754	\$35,000.00			
	Po Box 982238 El Paso, TX 79998	When was the debt incurred?	Opened 12/06 Last Active 5/13/15				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset?	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims					
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other Specify Credit Card					

Debte	or 1 Donald W. Cogswell		Case number (if know)			
4.4	Bank of America, NA Nonpriority Creditor's Name	Last 4 digits of account number	1130	\$13,243.00		
	Po Box 982238 El Paso, TX 79998	When was the debt incurred?	Opened 10/13 Last Active 6/02/15			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community debt	☐ Student loans				
	Is the claim subject to offset?	■ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Ongoing La	awsuit			
4.5	Capital One Bank USA NA Nonpriority Creditor's Name	Last 4 digits of account number	1455	\$748.00		
	PO Box 71083 Charlotte, NC 28281	When was the debt incurred?	Opened 05/17			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	lacktriangle At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	No	Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	Other. Specify				
		· · · ·				
4.6	Cavalry SPV I LLC Nonpriority Creditor's Name	Last 4 digits of account number		\$6,784.00		
	500 Summit Lake Drive STE 400	When was the debt incurred?	Opened 03/17			
	Valhalla, NY 10595 Number Street City State Zlp Code	As of the date you file, the claim	is: Chack all that apply			
	Who incurred the debt? Check one.	As of the date you me, the claim	э. Спеск ан тасарру			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure				
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa				
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing				
	☐ Yes	■ Other. Specify Ongoing La	awsuit			

Debtor 1 Donald W. Cogswell		Case number (if know)		
4.7	Cbna Nonpriority Creditor's Name	Last 4 digits of account number	1052	\$1,471.00
	Po Box 6497 Sioux Falls, SD 57117	When was the debt incurred?	Opened 02/12 Last Active 2/27/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	\square Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.8	Charles E. Githler, III Nonpriority Creditor's Name	Last 4 digits of account number	7269	\$1,000,000.00
	1605 Main St #910 Sarasota, FL 34236	When was the debt incurred?	10/2013	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	·	ebt with personal guarantee	
	Li Tes	Other. Specify	est with personal guarantee	
4.9	Chase Card Nonpriority Creditor's Name	Last 4 digits of account number	9064	\$11,609.00
	Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 10/06 Last Active 6/01/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	·	
	No	Debts to pension or profit-sharing		
	Yes	■ Other Specify Credit Card	1	

Debtor 1 Donald W. Cogswell		Case number (if know)		
4.1 0	Chase Card	Last 4 digits of account number	1670	\$6,550.00
	Nonpriority Creditor's Name Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 10/08 Last Active 6/19/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1	Citi	Last 4 digits of account number	7264	\$1,158.00
	Nonpriority Creditor's Name		Opened 11/14 Last Active	
	Po Box 6241 Sioux Falls, SD 57117	When was the debt incurred?	2/27/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.1	Citibank Na	Last 4 digits of account number	3416	\$2,972.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 20487	When was the debt incurred?	Opened 03/17	
	Kansas City, MO 64195 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	l	

1 Donald W. Cogswell	Case number (if know)		
Citibank Na	Last 4 digits of account number	4206	\$1,610.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 20487	When was the debt incurred?	Opened 06/16	·
Kansas City, MO 64195			
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Discover Fin Svcs Llc	Last 4 digits of account number	1539	\$16,657.00
Nonpriority Creditor's Name Pob 15316	When was the debt incurred?	Opened 05/11 Last Active 8/21/15	
Wilmington, DE 19850 Jumber Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
□ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Discover Fin Svcs Llc	Last 4 digits of account number	6859	\$369.00
Nonpriority Creditor's Name			********
Pob 15316 Wilmington, DE 19850	When was the debt incurred?	Opened 10/13 Last Active 3/19/18	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing		
□Yes	Other. Specify Credit Card		

Debtor 1 Donald W. Cogswell		Case number (if know)		
4.1				
6	Florida Talk Radio, LLC	Last 4 digits of account number	Unknown	
	Nonpriority Creditor's Name c/o Bentley and Bruning, PA 783 S Orange Ave, STE 220	When was the debt incurred?		
	Sarasota, FL 34236	_		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	_		
	■ Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts		
	□Yes	■ Other. Specify Business debt with personal guarantee		
	00	— Опет. Зреспу		
4.1 7	Genesis Communications I Inc	Last 4 digits of account number	Unknown	
	Nonpriority Creditor's Name PO BOX 25434 Tampa, FL 33622	When was the debt incurred? 2015		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
		☐ Unliquidated		
	Debtor 2 only	_ `		
	Debtor 1 and Debtor 2 only	■ Disputed Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt	_		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Business debt with personal guarantee		
4.1	Githler Development Inc.	Last 4 digits of account number 7269	Unknown	
	Nonpriority Creditor's Name 1605 Main St #910	When was the debt incurred? 2014		
	Sarasota, FL 34236 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	_	Student loans		
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	□Yes	Other Specify Business debt with personal guarantee		

Donald W. Cogswell	Case number (if know)		
Invest Yourself, LLC	Last 4 digits of account number	Unknowr	
Nonpriority Creditor's Name c/o Robert Rinear 2736 Pursell Circle Sarasota, FL 34232	When was the debt incurred?		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce report as priority claims	that you did not	
No	lacksquare Debts to pension or profit-sharing plans, and other similar de	bts	
Yes	■ Other. Specify Business debt with personal gu	arantee	
Marta A. Grande	Last 4 digits of account number	Unknown	
Nonpriority Creditor's Name 8874 Bloomfield Blvd. Sarasota, FL 34238	When was the debt incurred?		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	$\hfill \square$ Obligations arising out of a separation agreement or divorce report as priority claims	that you did not	
No	lacksquare Debts to pension or profit-sharing plans, and other similar de	bts	
☐Yes	■ Other. Specify Business debt with personal gu	arantee	
NV Energy	Last 4 digits of account number 1337	\$648.00	
Nonpriority Creditor's Name PO Box 30150 Reno, NV 89520	When was the debt incurred? Opened 12/01/16		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated ☐ Disputed		
Debtor 1 and Debtor 2 only			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	Constant leave		
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce report as priority claims		
No	\square Debts to pension or profit-sharing plans, and other similar de	bts	
□Yes	Other Specify Utilities		

Debtor 1 Donald W. Cogswell		Case number (if know)		
4.2	NIV Engrav		0594	¢50.00
2	NV Energy Nonpriority Creditor's Name	Last 4 digits of account number	9581	\$50.00
	PO Box 30150	When was the debt incurred?	Opened 04/17	
	Reno, NV 89520	_		
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	•	Debts to pension or profit-sharir	a plane, and other similar debte	
	■ No	·	g plans, and other similar debts	
	Yes	Other. Specify Utilities		
4.2				
3	Peter A. Wish	Last 4 digits of account number		Unknown
	Nonpriority Creditor's Name 1444 Harbor Drive When was the debt incurred?			
	Sarasota, FL 34239	9		
	Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply		s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only			
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans		
	☐ Check if this claim is for a community			
	debt		\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	- ·	
	Yes	Other. Specify Business of	ebt with personal guarantee	
4.2				
4	Peter A. Wish as Trustee of Nonpriority Creditor's Name	Last 4 digits of account number		Unknown
	the Peter A Wish Rev Trust	When was the debt incurred?		
	1444 Harbor Drive			
	Sarasota, FL 34239	_		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	_	Continued		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	■ Disputed	L. L. C.	
	☐ At least one of the debtors and another			
	Check if this claim is for a community	☐ Student loans		
	debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	g plans, and other similar debts	
	■ NO Ves		ebt with personal quarantee	
	1 1 7 4 5	Other Chester Bilkindee C	eur willi delsonal (maramee	

Donald W. Cogswell	Case number (if know)		
Philip J. Grande	Last 4 digits of account number 2764	Unknow	
Nonpriority Creditor's Name 8874 Bloomfield Blvd. Sarasota, FL 34238	When was the debt incurred?		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
No	\square Debts to pension or profit-sharing plans, and other similar debts		
☐ Yes	■ Other. Specify Business debt with personal guarantee		
Portfolio Recovery Assoc	Last 4 digits of account number 8042	\$8,551.0	
Nonpriority Creditor's Name 120 Corporate Blvd Ste 1 Norfolk, VA 23502	When was the debt incurred? Opened 02/16		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
No	\square Debts to pension or profit-sharing plans, and other similar debts		
Yes	Other. Specify Ongoing Lawsuit		
Radiology Assoc of TPA PA Nonpriority Creditor's Name	Last 4 digits of account number	\$165.0	
PO Box 31265 Tampa, FL 33631-3265	When was the debt incurred?		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not		
Is the claim subject to offset?	report as priority claims		
No	\square Debts to pension or profit-sharing plans, and other similar debts		
☐ Yes	■ Other, Specify Medical Bill		

Debtor 1 Donald W. Cogswell		Case number (if know)		
4.2	Robert Rinear	Last 4 digits of account number	Unknown	
<u> </u>	Nonpriority Creditor's Name 2736 Pursell Circle Sarasota, FL 34232	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	■ Other. Specify Business debt with personal guarantee		
4.2	Sarasota Ellis Associates	Last 4 digits of account number	Unknown	
	Nonpriority Creditor's Name 7978 Cooper Creek Blvd. University Park, FL 34201	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not		
		report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Business debt with personal guarantee		
4.3				
0	Sarasota Memorial Hospital Nonpriority Creditor's Name	Last 4 digits of account number	Unknown	
	PO Box 863414 Orlando, FL 32886-3414	When was the debt incurred? 2018		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	□ Yes	Other Specify Medical Bill		

Debt	or 1 Donald W. Cogswell	Case number (if know)		
4.3	Southwest Cos Corneration		2724	¢c4 00
1	Southwest Gas Corporation Nonpriority Creditor's Name	Last 4 digits of account number	3724	\$61.00
	PO Box 98512 Las Vegas, NV 89193-8512	When was the debt incurred?	Opened 2/01/17	
	Number Street City State Zlp Code	As of the date you file, the claim		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Consumer	debt	
4.3 2	Spot Link LLC Nonpriority Creditor's Name	Last 4 digits of account number	64NC	Unknown
	f/k/a Spot Link Inc. c/o Marta Grande - RA	When was the debt incurred?	2015	
	401 Commercial Court Unit H Venice, FL 34292 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Business d	ebt with personal guarantee	
4.3	Synchrony Bank	Last 4 digits of account number	2385	\$7,172.00
3	Nonpriority Creditor's Name			ψ1,112.00
	Attn: Bankruptcy Dept PO Box 965061	When was the debt incurred?	Opened 10/16	
	Orlando, FL 32896 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	Other Specify Credit Card		

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Debto	or 1 Donald W. Cogswell		Case number (if know)	
4.3	Synchrony Bank	Last 4 digits of account number	7463	\$706.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept PO Box 965061 Orlando, FL 32896	When was the debt incurred?	Opened 04/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	·		
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	ed claim:	
	_	☐ Student loans	ou olum.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	<u> </u>	aration agreement or divorce that you did not	
	No	Debts to pension or profit-shari	ng plans, and other similar debts	
		·		
	Yes	Other. Specify Credit Car	d 	
4.3 5	Trey M. Desenberg	Last 4 digits of account number		Unknown
	Nonpriority Creditor's Name PO Box 339 Sarasota, FL 34230	When was the debt incurred?	2014	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •	,	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts	
	Yes	Other. Specify Business	debt with personal guarantee	
is tr	List Others to Be Notified About a Dothis page only if you have others to be notified ying to collect from you for a debt you owe to se more than one creditor for any of the debts the fied for any debts in Parts 1 or 2, do not fill out	about your bankruptcy, for a debt that comeone else, list the original creditor i at you listed in Parts 1 or 2, list the add	n Parts 1 or 2, then list the collection agency	/ here. Similarly, if you
	and Address	On which entry in Part 1 or Part 2 did you		
_	on Collection Agen Spring Mountain Rd		Part 1: Creditors with Priority Unsecured Clai	
	Vegas, NV 89117	•	Part 2: Creditors with Nonpriority Unsecured	Claims
		Last 4 digits of account number		
	and Address	On which entry in Part 1 or Part 2 did you	•	
	Service Lacev St.		Part 1: Creditors with Priority Unsecured Clai	
	t Chester, PA 19382	•	Part 2: Creditors with Nonpriority Unsecured	Claims
		Last 4 digits of account number		
Name	and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
	ary Portfolio Services	Line 4.12 of (<i>Check one</i>):	J Part 1: Creditors with Priority Unsecured Clai	ms
	: Bankruptcy oox 27288	•	Part 2: Creditors with Nonpriority Unsecured	Claims
	pe, AZ 85285	Last 4 digits of account number		
Name	and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
	Collection Serv		Part 1: Creditors with Priority Unsecured Clai	ms

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Debtor 1 Donald W. Cogswell	Case number (if know)
8860 W Sunset Las Vegas, NV 89148	■ Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Citibank Na Attn: Bankruptcy Dept Po Box 20487 Kansas City, MO 64195	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.6 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Trainisus Orty, IIIO 04100	Last 4 digits of account number
Name and Address Cooling & Winter LLC Melissa Alvarez, Esq. 7901 SW 6th Ct STE 310 Fort Lauderdale, FL 33324	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address David Bowman, Esq 2750 Ringling Blvd Ste 3 Sarasota, FL 34237	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.20 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Eric S. Olson, Esq. 9110 Strada Place Mercato - STE 6200 Naples, FL 34108-2938	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.32 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
Name and Address Hayt, Hayt & Landau 7765 SW 87th Ave Ste 101 Miami, FL 33173	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.6 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
Name and Address Kelley G. Price, Esq. Cohen & Grigsby, P.C. 9110 Strada PI Ste 6200 Naples, FL 34108-2396	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.25 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
Name and Address Kelley G. Price, Esq. Cohen & Grigsby, P.C. 9110 Strada PI Ste 6200 Naples, FL 34108-2396	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.20 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
Name and Address Melissa Alvarez, Esq 7901 SW 6th Court STE 310 Fort Lauderdale, FL 33324	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 33SC
	Last 4 digits of account number 33SC
Name and Address Midland Funding 2365 Northside Dr STE 30 San Diego, CA 92108	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.33 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Midland Funding 2635 Northside Dr STE 300 San Diego, CA 92108	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.34 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address	
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?

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Debtor 1 Donald W. Cogswell		Case number (if know)
Modlin & Associates PA 1551 Sawgrass Corporate Pkcy STE 110 Sunrise, FL 33323	Line 4.2 of (Check one):	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Pollack & Rosen, P.A. 806 Douglas Rd. STE 200 Coral Cables, FL 33134	On which entry in Part 1 or Part 2 di Line 4.26 of (Check one):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Portfolio Recovery Assoc 120 Corporate Blvd Ste 1 Norfolk, VA 23502	On which entry in Part 1 or Part 2 di Line 4.13 of (Check one):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Portfolio Recovery Assoc 120 Corporate Blvd Ste 1 Norfolk, VA 23502	On which entry in Part 1 or Part 2 di Line 4.5 of (Check one):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Synchrony Bank Attn: Bankruptcy Dept PO Box 965061 Orlando El 33806	On which entry in Part 1 or Part 2 di Line 4.26 of (Check one):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Orlando, FL 32896	Last 4 digits of account number	
Name and Address Thomas Avrutis Esq PO Box 4137 Sarasota, FL 34230	On which entry in Part 1 or Part 2 di Line 4.8 of (Check one): Last 4 digits of account number	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address	On which entry in Part 1 or Part 2 di	id you list the original creditor?
Thomas Avrutis Esq PO Box 4137 Sarasota, FL 34230	Line 4.18 of (Check one): Last 4 digits of account number	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address	On which entry in Part 1 or Part 2 di	id you list the original creditor?
Thomas Avrutis Esq PO Box 4137 Sarasota, FL 34230		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address W. Andrew Clayton, Esq. Worth Graham, Esq. 1 North Tuttle Ave	On which entry in Part 1 or Part 2 di Line 4.18 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Sarasota, FL 34237	Last 4 digits of account number	
Part 4: Add the Amounts for Each Type	e of Unsecured Claim	

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims				-	
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	1,300.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00

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Debtor 1 Donald W. Cogswell Case number (if know) 6e. Total Priority. Add lines 6a through 6d. 6e. 1,300.00 Total Claim Student loans 6f. 0.00 Total claims from Part 2 Obligations arising out of a separation agreement or divorce that 6g. 0.00 6g. you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 6h. 6h. 0.00 Other. Add all other nonpriority unsecured claims. Write that amount 6i. 6i. 1,182,202.00 Total Nonpriority. Add lines 6f through 6i. 6j. 1,182,202.00

Fill in this information to identify your case:						
Debtor 1	Donald W. Cogswell					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States B	ankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA			
Case number						
(if known)						

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the street, City, State and ZIF	e contract or lease Code	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.4	,				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	Oity		Otate	ZII Oode	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

Official Form 106G

Cill in 4b	in information to identify your				
	is information to identify your				
Debtor 1	Donald W. Cogsv First Name	Well Middle Name	Last Name		
Debtor 2 (Spouse if,		Middle Name	Last Name		
United S	tates Bankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA		
Case nu (if known)	mber				☐ Check if this is an amended filing
_	al Form 106H dule H: Your Cod	ebtors			12/15
people a fill it out, your nan	re filing together, both are equ and number the entries in the ne and case number (if known)	ally responsible for supp boxes on the left. Attach . Answer every question	olying correct information the Additional Page to th	. If more space is in the to	rate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write
_	o you have any codebtors? (If	you are filing a joint case, (do not list either spouse as	a codeptor.	
□ N ■ Y					
■ Y	es				
	lithin the last 8 years, have you ona, California, Idaho, Louisiana,				
■ N	o. Go to line 3.				
ΠY	es. Did your spouse, former spou	use, or legal equivalent live	e with you at the time?		
in li: For:	ne 2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make sur	e you have listed t	ng with you. List the person shown he creditor on Schedule D (Officia Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cr Check all schedul	editor to whom you owe the debt es that apply:
3.1	SPOT LINK, INC 1605 MAIN STREET - STE Sarasota, FL 34236	. 910		☐ Schedule D, I ■ Schedule E/F ☐ Schedule G _ Charles E. Gith	f, line 4.8
3.2	SPOT LINK, INC 1605 MAIN STREET - STE Sarasota, FL 34236	. 910		☐ Schedule D, I ■ Schedule E/F ☐ Schedule G _ Trey M. Desent	, line <u>4.35</u>

	in this information to identify your ca									
Del	btor 1 Donald W. C	Cogswell			_					
	btor 2 buse, if filling)				_					
Uni	ited States Bankruptcy Court for the	: MIDDLE DISTRICT O	F FLORIDA		_					
	se number nown)					□ A	ck if this is an amende supplement	ed filing ent showin	ng postpetition	n chapter
0	fficial Form 106I					_	1M / DD/ \		3	
	chedule I: Your Inc	ome				IV	ו יוטט יווווי			12/1
sup spo atta	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your s th you, do not includ	pouse i le inforr	is livi matio	ng with n about	you, incl t your spo	ude infori ouse. If m	mation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-fi	iling spouse	
	If you have more than one job,	Employment status	■ Employed				☐ Empl	oyed		
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not e	mployed		
	employers.	Occupation	Manager							
	Include part-time, seasonal, or self-employed work.	Employer's name	A Better Solution	n, Inc.						
	Occupation may include student or homemaker, if it applies.	Employer's address	361 Interstate BI Sarasota, FL 342							
		How long employed the	nere? July 201	6			_			
Pai	Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If y	you have nothing to re	port for	any li	ne, write	9 \$0 in the	space. In	clude your no	n-filing
	ou or your non-filing spouse have mo e space, attach a separate sheet to		embine the information	for all e	emplo	yers for	that perso	on on the li	ines below. If	you need
						For Del	otor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	2	,505.43	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	-
4	Calculate gross Income. Add lin	ne 2 + line 3		4	\$	2 50	05 43	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Debt	tor 1	Donald W. Cogswell		Case	number (if known)		
				For	Debtor 1		Debtor 2 or
	Cop	y line 4 here	4.	\$	2,505.43	\$	n-filing spouse N/A
_				. –		· -	
5.		all payroll deductions:	_				
	5a.	Tax, Medicare, and Social Security deductions	5a.	: -	345.95	\$_	N/A
	5b.	Mandatory contributions for retirement plans	5b.	: —	0.00	\$_	N/A
	5c.	Voluntary contributions for retirement plans	5c.	· -	0.00	\$_	N/A
	5d.	Required repayments of retirement fund loans	5d.	: —	0.00	* *	N/A
	5e. 5f.	Insurance Domestic support obligations	5e. 5f.	\$_	0.00	\$ 	N/A N/A
	51. 5g.	Union dues	_	: -	0.00	Φ_	N/A N/A
	5g. 5h.	Other deductions. Specify:	5g. 5h.	· · ·	0.00	_ φ [_]	N/A N/A
0		· · ·	_	· -			
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	345.95	\$_	N/A
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	2,159.48	\$	N/A
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total					
		monthly net income.	8a.		0.00	\$_	N/A
	8b.	Interest and dividends	8b.	\$_	0.00	\$	N/A
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	8c. 8d.	\$_	3,283.00	\$_ \$_	N/A N/A
	8e.	Social Security	8e.	\$_	0.00	\$	N/A
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$_	0.00	\$	N/A_
	8g.	Pension or retirement income	8g.	\$_	0.00	\$	N/A
	8h.	Other monthly income. Specify:	_ 8h.	+ \$_	0.00	+ \$_	N/A_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	3,283.00	\$_	N/A
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	5,442.48 + \$_		N/A = \$ 5,442.48
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your refriends or relatives. or include any amounts already included in lines 2-10 or amounts that are not a cify:	depe		. ,	•	Schedule J. 11. +\$ 0.00
12.		the amount in the last column of line 10 to the amount in line 11. The resign that amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$ 5,442.48
13.	Do y	ou expect an increase or decrease within the year after you file this form	?				Combined monthly income
		No.					
		Yes. Explain: 8c. Estranged wife contributes to household exp static and there is some variation month to mont		s and	childcare for	childı	ren. Situation is not

						Ì		
Fill	in this informa	tion to identify yo	ur case:					
Deb	tor 1	Donald W. C	ogswell			Che	ck if this is:	
					<u>.</u>		An amended filing	
	tor 2 ouse, if filing)						A supplement show 13 expenses as of	ving postpetition chapter the following date:
	, ,,						·	
Unit	ed States Bankr	ruptcy Court for the:	MIDDLE	E DISTRICT OF FLORIDA	<i>A</i>		MM / DD / YYYY	
Cas	e number							
(If kı	nown)							
Of	fficial Fo	rm 106J						
Sc	chedule	J: Your I	Exper	ISAS				12/1
				If two married people a	re filing together, be	oth are equ	ally responsible fo	
info	ormation. If m		eded, atta	ch another sheet to this				
Par	t 1: Descr	ibe Your House	hold					
1.	Is this a join	nt case?						
	■ No. Go to	line 2. s Debtor 2 live i	in a conar	ata hausahald?				
	□ res. Doe		ii a sepai	ate nousenoia:				
	=	_	st file Offici	al Form 106J-2, <i>Expense</i>	s for Separate House	ehold of Deb	tor 2	
0			_	a	5 767 Coparato 776466			
2.	•	e dependents?	☐ No					
	Do not list De Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	tho						□ No
	Do not state dependents				Son		4	■ Yes
	·							□ No
					Daughter		7	■ Yes
								□ No
					Daughter		14	Yes
					0		47	□ No
3.	Do your ove	onsos includo	_		Son			Yes
٥.		enses include f people other th	nan	No				
	yourself and	d your depender	nts? ⊔	Yes				
Par	t 2: Estim	ate Your Ongoir	ng Monthi	y Expenses				
exp	enses as of a			uptcy filing date unless y is filed. If this is a sup				
app	licable date.							
				government assistance				
	value of sucr ficial Form 10		a nave inc	luded it on Schedule I:	Your Income		Your expe	enses
•		ŕ						
4.				ses for your residence.	Include first mortgage	e 4. \$	\$	2,493.00
		nd any rent for the	s ground o	i lot.				<u>, </u>
		led in line 4:						
		estate taxes	التحقيقي والم	'a inquenca		4a. \$		0.00
	•	rty, homeowner's maintenance, re		's insurance ipkeep expenses		4b. § 4c. §	·	0.00 150.00
		owner's associat	•			4d. \$		136.25
5.	Additional n	nortgage payme	ents for yo	our residence, such as ho	ome equity loans	5. \$		400.00

Debt	or 1 Donald W. Cogswell	Case num	nber (if known)	
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	250.00
	6b. Water, sewer, garbage collection	6b.	\$	95.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	560.00
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies		\$	1,000.00
8.	Childcare and children's education costs	8.	\$	735.00
9.	Clothing, laundry, and dry cleaning	9.	\$	325.00
	Personal care products and services	10.	· -	85.00
	Medical and dental expenses	11.	· -	250.00
	Transportation. Include gas, maintenance, bus or train fare.		<u> </u>	200.00
	Do not include car payments.	12.	\$	250.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
	Charitable contributions and religious donations	14.	\$	0.00
	Insurance.		· -	
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	389.00
	15b. Health insurance	15b.	\$	1,300.00
	15c. Vehicle insurance	15c.	\$	230.00
	15d. Other insurance. Specify:	15d.	\$	0.00
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		•	<u> </u>
	Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	· -	0.00
8	Your payments of alimony, maintenance, and support that you did not report as		Ψ	0.00
10.	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.		\$	0.00
	Specify:	19.		
20.	Other real property expenses not included in lines 4 or 5 of this form or on Sche	dule I: Yo	our Income.	
	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	*	0.00
21	Other: Specify:		+\$	0.00
- ' -	Other: Opecity.		ΙΨ	0.00
22.	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	8,748.25
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	8,748.25
	, , ,			0,1 10120
23.	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	5,442.48
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	8,748.25
	23c. Subtract your monthly expenses from your monthly income.		_	2 205 77
	The result is your monthly net income.	23c.	\$	-3,305.77
24.	Do you expect an increase or decrease in your expenses within the year after yo For example, do you expect to finish paying for your car loan within the year or do you expect your modification to the terms of your mortgage? No.	mortgage	payment to increase	
	☐ Yes. Explain here: Expenses do vary month to month, so Debto	r has inc	dicated best es	stimate.
				·

Fill in this informa	ation to identify your	case:				
Debtor 1	Donald W. Cogsw	rell				
	First Name	Middle Name	Last	Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last	Name		
United States Bank	kruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA			
Case number						☐ Check if this is an amended filing
Official Form Declarati		n Individual	l Debto	or's Schedule	es	12/15
obtaining money of	or property by fraud in U.S.C. §§ 152, 1341, 1	connection with a ban				ement, concealing property, or 0, or imprisonment for up to 20
Did you pay	or agree to pay some	one who is NOT an atto	rney to help	you fill out bankruptcy fo	rms?	
■ No						
☐ Yes. Na	me of person					cruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	of perjury, I declare rue and correct.	that I have read the sum	nmary and so	chedules filed with this de	eclaratio	on and
X /s/ Dona	ld W. Cogswell		Х			
	N. Cogswell of Debtor 1			Signature of Debtor 2		
Date <u>Ju</u>	ine 29, 2018			Date		

Fill	in this inform	nation to identify you	r casa:			
Deb	tor 1	Donald W. Cogs First Name	Middle Name	Last Name		
	tor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ba	nkruptcy Court for the:	MIDDLE DISTRICT OF F	LORIDA		
Cas (if kno	e number					Check if this is an imended filing
Sta Be a	s complete a	of Financial		are filing together, both are	ankruptcy equally responsible for sup	
num	ber (if knowı	n). Answer every que	stion.			
Part 1.		r current marital statu	arital Status and Where You is?	Lived Before		
	■ Married□ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>ı</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territor co, Texas, Washington and V	
	■ No □ Yes. Ma	ake sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	Explai	n the Sources of You	r Income			
	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part-		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	•	of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$12,714.85	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1	Donald W. Co	gswell		Case	e number (if known)		
			Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	lendar year: to December 3	1, 2017)	☐ Wages, commissions, bonuses, tips	Unknown	☐ Wages, commissions, bonuses, tips		
			☐ Operating a business		☐ Operating a	business	
	endar year befo to December 3		☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, com bonuses, tips	missions,	
			☐ Operating a business		☐ Operating a	business	
List eac	ch source and th	e gross incon	,	ou received together, list it o	,		
			Debtor 1		Debtor 2		
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below.		Gross income (before deductions and exclusions)
Part 3: L	ist Certain Pay	ments You M	Made Before You Filed for	Bankruptcy			
6. Are eitl	her Debtor 1's o	or Debtor 2's	debts primarily consumer	debts?			
■ No			ebtor 2 has primarily consu- personal, family, or househol	umer debts. Consumer debts d purpose."	are defined in 11	U.S.C. § 101	1(8) as "incurred by an
	■ No.	00 days before Go to line 7.	e you filed for bankruptcy, di	d you pay any creditor a total	of \$6,425* or moi	e?	
		paid that cre-		d a total of \$6,425* or more into for domestic support obligates bankruptcy case			
	* Subject to	adjustment	on 4/01/19 and every 3 years	s after that for cases filed on	or after the date of	f adjustment.	
☐ Ye			both have primarily consule you filed for bankruptcy, di	imer debts. d you pay any creditor a total	of \$600 or more?		
		Go to line 7.					
		include paym		d a total of \$600 or more and bligations, such as child supp			
Credit	or's Name and	Address	Dates of payme		Amount you	Was this p	payment for
				paid	still owe		

Case number (if known)

7.	Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general prof which you are an officer, director, person in a business you operate as a sole proprietor. A alimony.	artners; relatives of any gen a control, or owner of 20% o	eral partners; partne r more of their voting	rships of which you	ou are a general partner; corporations ny managing agent, including one fo	
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment	
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost		ments or transfer a	ny property on a	ccount of a debt that benefited an	
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name	
Pa	rt 4: Identify Legal Actions, Repossessio	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the case	
	Charles E. Githler, III and Githler Development Inc. vs. Donald Cogswell et al 2014 CA 007269 NC	nt Inc. vs. Donald 2000 Main St sarasota, FL 34237			■ Pending □ On appeal □ Concluded	
					Re-opened	
	Donald Cogswell v. Spot Link f/k/a Spot Link Inc, a Florida Limited Liability Company Conterclaim - Spot Link f/k/a Spot Link Inc, a Florida Limited Liability Company v. Donald Cogswell and Robert Rinear, Invest Yourself, LLC and Florida Talk Radio, LLC 2015 CA 002764 NC	Civil	Sarasota Clerk 2000 Main St Sarasota, FL 34		■ Pending □ On appeal □ Concluded	
	Bank of America, NA v. Donald W. Cogswell 2017 CC 004533	Civil	Sarasota Clerk 2000 Main St Sarasota, FL 34		■ Pending □ On appeal □ Concluded	
	Portfolio Recovery Assoiciates LLC vs. Donald W. Cogswell 2017 CC 008042	Civil	Sarasota Clerk of Court 2000 Main St Sarasota, FL 34237		Pending On appeal Concluded	
	Cavalry SPV I LLC vs. Donald W. Cogswell 2018 CC 000653	Civil	Sarasota Clerk 2000 Main St Sarasota, FL 34		■ Pending □ On appeal □ Concluded	

Debtor 1 **Donald W. Cogswell**

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Deb	otor 1 Don a	ald W. Cogswell		Case number (if known)	
	Case title	per	Nature of the case	Court or agency	Status of th	e case
	Federal Sa Link Inc, I	Express Bank FSB a avings Bank vs. Spot Donald Cogswell et al 05749 NC	Civil	Sarasota Clerk of Court 2000 Main St Sarasota, FL 34237	■ Pending □ On appe □ Conclud	eal
10.		or before you filed for bankr at apply and fill in the details b		perty repossessed, foreclosed,	garnished, attached	d, seized, or levied?
	_	to line 11. I in the information below.				
	Creditor Na	me and Address	Describe the Property		Date	Value of the
			Explain what happene	ed		property
11.	accounts or	ays before you filed for bank refuse to make a payment I in the details.		cluding a bank or financial ins	titution, set off any a	amounts from your
	Creditor Na	nme and Address	Describe the action th	e creditor took	Date action was taken	Amount
Par	court-appoi ■ No □ Yes	nted receiver, a custodian, of the control of the c	or another official?	perty in the possession of an a		
13.	■ No		ruptcy, did you give any gif	ts with a total value of more th	an \$600 per person	?
		I in the details for each gift.	Describe the wift		D-1	Value
	per person			5	Dates you gave the gifts	Value
	Person to \ Address:	Whom You Gave the Gift and	d			
14.	■ No	ars before you filed for bank	1 37 3 6 36	ts or contributions with a total	value of more than	\$600 to any charity?
	more than Charity's N		·	ou contributed	Dates you contributed	Value
Par	t 6: List C	ertain Losses				
15.	Within 1 yea		uptcy or since you filed for	bankruptcy, did you lose anyth	ning because of thef	t, fire, other disaster
	■ No □ Yes. Fi	Il in the details.				
	Describe th	ne property you lost and ss occurred		overage for the loss urance has paid. List pending of Schedule A/B: Property.	Date of your loss	Value of property lost

Debtor 1	Donald W. Cogswell	Case number (if known)						
	_							
Part 7:	List Certain Payments or Transfers							
cons	in 1 year before you filed for bankruptcy, d sulted about seeking bankruptcy or prepari de any attorneys, bankruptcy petition preparer	ng a bankruptcy petition?			rty to anyone you			
_	No							
	Yes. Fill in the details.							
Add Ema	son Who Was Paid dress ail or website address son Who Made the Payment, if Not You	Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment			
Dol	llar Learning Foundation			6/18/18	\$15.00			
539 Sar	ristopher D. Smith P.A. 11 Lakewood Ranch Blvd N STE 203 rasota, FL 34240 ith@ChrisSmith.com	Attorney Fees + filing fee of \$3	335	3/29/18	\$3,665.00			
prom Do no	in 1 year before you filed for bankruptcy, d nised to help you deal with your creditors o ot include any payment or transfer that you list	or to make payments to your creditor		or transfer any prope	rty to anyone who			
	Yes. Fill in the details.							
	son Who Was Paid Iress	Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment			
trans Includinclud	in 2 years before you filed for bankruptcy, sferred in the ordinary course of your busing de both outright transfers and transfers made de gifts and transfers that you have already lis No Yes. Fill in the details.	ness or financial affairs? as security (such as the granting of a s						
	son Who Received Transfer	Description and value of	Describe a	any property or	Date transfer was			
Add	dress	property transferred		received or debts	made			
Pat 260	son's relationship to you ricia Sincore Viola 08 SE 19th Ct Unit 204-A mestead, FL 33035	2608 SE 19th Ct Unit 204-A, Homestead, FL 33035 - \$42,800	appraise	unty property r assessed n in 2017:	9/21/2017			
Mot	ther		property had beer	as lived in since 1989 but n unable to ortgage until				
bene ■	in 10 years before you filed for bankruptcy, eficiary? (These are often called asset-protect No Yes. Fill in the details.		elf-settled tru	ust or similar device	of which you are a			
_	ne of trust	Description and value of the prope	erty transferr	ed	Date Transfer was made			

Debtor 1 Donald W. Cogswell

Case number (if known)

Par	18: List of Certain Financial Accounts, Ins	truments, Safe Deposi	t Boxes, and Sto	rage Units	5		
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated in the cooperative of the cooperativ	r other financial accou	nts; certificates c	of deposit		, ,	
	Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accour instrument	nt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed fo	bankruptcy, any	/ safe dep	osit box or other deposite	ory for securities,	
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Describe the contents Address (Number, Street, City, State and ZIP Code)						
22.	Have you stored property in a storage unit o	r place other than you	home within 1 y	ear before	you filed for bankruptcy	?	
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)				he contents	Do you still have it?	
Par	9: Identify Property You Hold or Control	or Someone Else					
23.	Do you hold or control any property that sor for someone.	neone else owns? Incl	ude any property	you borre	owed from, are storing fo	, or hold in trust	
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe t	he property	Value	
Par	10: Give Details About Environmental Info	rmation					
For	he purpose of Part 10, the following definition	ns apply:					
	Environmental law means any federal, state, toxic substances, wastes, or material into th regulations controlling the cleanup of these	e air, land, soil, surfac	e water, groundw				
	Site means any location, facility, or property to own, operate, or utilize it, including dispo	•	environmental la	w, whethe	er you now own, operate,	or utilize it or used	
	Hazardous material means anything an envir hazardous material, pollutant, contaminant,		as a hazardous v	vaste, haz	ardous substance, toxic	substance,	
Rep	ort all notices, releases, and proceedings tha	t you know about, rega	ardless of when t	hey occui	rred.		
24.	Has any governmental unit notified you that	you may be liable or p	otentially liable u	ınder or in	violation of an environm	ental law?	
	■ No □ Yes. Fill in the details.						
	Name of site	Governmental un	it	Enviro	nmental law, if you	Date of notice	
	Address (Number, Street, City, State and ZIP Code)	Address (Number, S		know i			

Del	otor 1	Donald W. Cogswell			Cas	se number (ii	f known)		
25.	Hav	e you notified any governmental unit of	fany	release of hazardous material?					
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State an ZIP Code)		Environme know it	ntal law, if you	Date of notice	
26.	Hav	e you been a party in any judicial or ad	minis	trative proceeding under any env	ironm	nental law?	Include settlements	and orders.	
		No Yes. Fill in the details.							
		se Title se Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nati	ure of the c	ase	Status of the case	
Par	t 11:	Give Details About Your Business or	Con	nections to Any Business					
27.	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?								
		☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
		■ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
		☐ A partner in a partnership	xecutive of a corporation						
		☐ An officer, director, or managing ex							
		☐ An owner of at least 5% of the votin	ng or	equity securities of a corporation	ı				
		No. None of the above applies. Go to	Part '	12.					
		Yes. Check all that apply above and fil	l in tl	ne details below for each busines	s.				
		siness Name dress	Describe the nature of the business			Employer Identification number			
		mber, Street, City, State and ZIP Code)	Na	me of accountant or bookkeeper		Do not include Social Security number or ITIN.			
		OT LINK, INC 05 MAIN STREET - STE. 910	Software Co.			EIN:	siness existed 26-0574151		
		rasota, FL 34236				From-To	7/2007 - 5/6/2014		
	BR LL	ROADCAST MEDIA NETWORK,	Ad	vertising		EIN:	46-5012661		
		95 TAMIAMI TRAIL S., UNIT 139				From-To	3/5/2014 - 9/23/201	6	

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

■ No

Venice, FL 34293

☐ Yes. Fill in the details below.

Name Address

(Number, Street, City, State and ZIP Code)

Date Issued

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Debto	r 1 Donald W. Cogswell		Case number (if known)	
Port 1	2. Sign Polow			
Part I	2: Sign Below			
are tru with a	e and correct. I understand that m		nments, and I declare under penalty of perjury that the answers property, or obtaining money or property by fraud in connection up to 20 years, or both.	
/s/ Do	onald W. Cogswell			
Dona	ild W. Cogswell ture of Debtor 1	Signature of Debto	r 2	
Date	June 29, 2018	Date		
Did yo	u attach additional pages to Your	Statement of Financial Affairs for In	dividuals Filing for Bankruptcy (Official Form 107)?	
■ No				
☐ Yes	3			
Did yo	u pay or agree to pay someone wh	no is not an attorney to help you fill	out bankruptcy forms?	
■ No				
☐ Yes	s. Name of Person Attach the	Bankruptcy Petition Preparer's Notice	, Declaration, and Signature (Official Form 119).	

Fill in this information to identify your case:	
Debtor 1 Donald W. Cogswell First Name Middle Name Last Name	
Debtor 2	
(Spouse if, filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA	
	eck if this is an ended filing
Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7	12/15
If you are an individual filing under chapter 7, you must fill out this form if:	
creditors have claims secured by your property, or	
you have leased personal property and the lease has not expired. You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meet whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and on the form	
If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Bosign and date the form.	th debtors must
Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any write your name and case number (if known).	additional pages,
Part 1: List Your Creditors Who Have Secured Claims	
1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form	106D), fill in the
	claim the property on Schedule C?
Creditor's Suntrust Bank ☐ Surrender the property. ☐ No name: ☐ Retain the property and redeem it.	
Description of 19864 Cobblestone Circle	
Vonice El 34202-4194	
property securing debt: Sarasota County HOMESTEAD, keep	
Creditor's US Bank Home Mortgage ☐ Surrender the property. ☐ No	
_ ' ' '	
name: Retain the property and redeem it. Retain the property and enter into a	

Part 2: List Your Unexpired Personal Property Leases

HOMESTEAD, keep

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

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Debtor 1 Donald W. Cogswell	Case number (if known)
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention about a property that is subject to an unexpired lease.	any property of my estate that secures a debt and any personal
X /s/ Donald W. Cogswell X	
Donald W. Cogswell Signature of Debtor 1	Signature of Debtor 2
Date Date	

Fill in this inf	formation to identify your case:	Cl	and and have and		
Debtor 1	Donald W. Cogswell		eck one box only 2A-1Supp:	as directed in this form and in F	iorm
Debtor 2			1 There is no	presumption of abuse	
(Spouse, if filing			_		n of ohuse
United State	s Bankruptcy Court for the: Middle District of F	Florida		tion to determine if a presumption be made under Chapter 7 Mean	
Case numbe	er		Calculation	(Official Form 122A-2).	
(if known)				Test does not apply now because ilitary service but it could apply I	
			☐ Check if this	is an amended filing	
Official	Form 122A - 1				
Chapte	r 7 Statement of Your Cur	rent Monthly Inc	ome		12/1
attach a separ case number (qualifying mili	te and accurate as possible. If two married people a rate sheet to this form. Include the line number to a (if known). If you believe that you are exempted fro itary service, complete and file Statement of Exemp Calculate Your Current Monthly Income s your marital and filing status? Check one or	hich the additional information a m a presumption of abuse becau tion from Presumption of Abuse	applies. On the top se you do not hav	of any additional pages, write you e primarily consumer debts or bed	ur name and cause of
☐ Not	married. Fill out Column A, lines 2-11.				
☐ Mar	ried and your spouse is filing with you. Fill ou	ut both Columns A and B, lines	2-11.		
☐ Mar	ried and your spouse is NOT filing with you.	You and your spouse are:			
	iving in the same household and are not lega	ally separated. Fill out both Co	lumns A and B, li	nes 2-11.	
ļ ŗ	iving separately or are legally separated. Fill openalty of perjury that you and your spouse are leving apart for reasons that do not include evading	egally separated under nonbar	kruptcy law that a	applies or that you and your spo	
101(10A). I the 6 montl	average monthly income that you received from all For example, if you are filing on September 15, the 6-m ns, add the income for all 6 months and divide the total vn the same rental property, put the income from that p	onth period would be March 1 thro by 6. Fill in the result. Do not include	ugh August 31. If the de any income amo	e amount of your monthly income valunt more than once. For example, if	ried during
			Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	ross wages, salary, tips, bonuses, overtime, deductions).	and commissions (before all	\$	\$	
Columr	ny and maintenance payments. Do not include n B is filled in.		\$	\$	
of you from ar and roo	ounts from any source which are regularly pa or your dependents, including child support a unmarried partner, members of your household ommates. Include regular contributions from a sp . Do not include payments you listed on line 3.	Include regular contributions d, your dependents, parents,	\$	\$	
	come from operating a business, profession,	or farm			
	,	Debtor 1			
Gross r	receipts (before all deductions)	\$			
	ry and necessary operating expenses	-\$		_	
	nthly income from a business, profession, or far	m\$ Copy here ->	\$	\$	
6. Net inc	come from rental and other real property	Debtor 1			
Cross.	receipte (hefere all deductions)	\$			
	receipts (before all deductions) ry and necessary operating expenses	- \$			
	nthly income from rental or other real property	\$ Copy here ->	\$	\$	
	at dividends and royalties	Ť	\$		

Official Form 122A-1

Debto	r1 <u> </u>	Donald W. Cogswell		Case numbe	r (<i>if known</i>)				
				Column A Debtor 1		Column B Debtor 2 o	or	ouse	
8.	Unen	imployment compensation		\$		\$			
	Do no	not enter the amount if you contend that the amount received was a bene Social Security Act. Instead. list it here:				`			
	Fo	or you \$ or your spouse \$							
9.	Pens	sion or retirement income. Do not include any amount received that wa	as a	\$		\$			
10.	Do no receiv dome	ome from all other sources not listed above. Specify the source and an not include any benefits received under the Social Security Act or payment eived as a victim of a war crime, a crime against humanity, or international nestic terrorism. If necessary, list other sources on a separate page and public below.	nts Il or	\$		¢			
		•		\$		Ψ \$			
		Total amounts from separate pages, if any.		\$		\$			
		, , , ,	_		7		_		
11.	Calc ı each	culate your total current monthly income. Add lines 2 through 10 for n column. Then add the total for Column A to the total for Column B.	\$		+ -		=	\$	
									rrent monthly
Part	2.	Determine Whether the Means Test Applies to You						income	
ı aıı	2.	Determine Whether the Means Test Applies to Tou							
12.	Calcu	culate your current monthly income for the year. Follow these steps:					Г		
	12a. (Copy your total current monthly income from line 11		Сор	y line 11	here=>		\$	
	ı	Multiply by 12 (the number of months in a year)					L	x 12	2
	12b.	The result is your annual income for this part of the form				12	b.	\$	
13.	Calcu	culate the median family income that applies to you. Follow these ste	ps:				L		
	Fill in	n the state in which you live.							
	F::::	a the assumber of a contain seconds in							
		n the number of people in your household.					Г		
	To fin	n the median family income for your state and size of householdind a list of applicable median income amounts, go online using the link s his form. This list may also be available at the bankruptcy clerk's office.	specified	in the separa	ate instruc	13 tions		\$	
14.	How	v do the lines compare?							
	14a.	Line 12b is less than or equal to line 13. On the top of page 1, cl Go to Part 3.	heck box	1, There is	no presun	nption of abu	se.		
	14b.	Line 12b is more than line 13. On the top of page 1, check box 2 Go to Part 3 and fill out Form 122A-2.	2, The pro	esumption o	f abuse is	determined l	by F	orm 122	A-2.
Part	3:	Sign Below							
		By signing here, I declare under penalty of perjury that the information of	n this sta	atement and	in any att	achments is	true	and cor	rect.
	X	X /s/ Donald W. Cogswell							
		Donald W. Cogswell Signature of Debtor 1							
	Date	te June 29, 2018							
		MM / DD / YYYY If you shocked line 14a, do NOT fill out or file Form 133A 3							
		If you checked line 14a, do NOT fill out or file Form 122A-2.							
		If you checked line 14b, fill out Form 122A-2 and file it with this form.							

Official Form 122A-1

Fill	in this info	orma	tion to identify your case:		
Deb	tor 1	Dο	nald W. Cogswell		
	tor 2 ouse, if filin	g)			
Unit	ed States E	Bankı	ruptcy Court for the: Middle District of Florida		
Cae	e number			ı	☐ Check if this is an amended filing
	nown)				
Off	icial F	orr	n 122A - 1Supp		
Sta	ateme	nt	of Exemption from Presumption of A	۱d۶	use Under § 707(b)(2) 12/1
xen	npted from usions in t ired by 11	n a pr his s U.S.	at together with Chapter 7 Statement of Your Current Monthly In resumption of abuse. Be as complete and accurate as possible, statement applies to only one of you, the other person should of C. § 707(b)(2)(C).	. If tw	vo married people are filing together, and any of the
					0.001/0
1.	personal,	famil	s primarily consumer debts? Consumer debts are defined in 11 Uy, or household purpose." Make sure that your answer is consistenting for Bankruptcy (Official Form 1).		
			Form 122A-1; on the top of page 1 of that form, check box 1, <i>There</i> ement with the signed Form 122A-1.	is no	presumption of abuse, and sign Part 3. Then submit this
	☐ Yes. C	• • •	<u> </u>		
		50 10	1 411 2.		
Part	12: De	term	ine Whether Military Service Provisions Apply to You		
2.	Are you a	a disa	abled veteran (as defined in 38 U.S.C. § 3741(1))?		
	□ No. C				
		•	ou incur debts mostly while you were on active duty or while you were s.C. § 101(d)(1); 32 U.S.C. § 901(1).	re pe	rforming a homeland defense activity?
	□N	lo.	Go to line 3.		
	ПΥ	es.	Go to Form 122A-1: on the top of page 1 of that form, check box 1, submit this supplement with the signed Form 122A-1.	Thei	re is no presumption of abuse, and sign Part 3. Then
3.	Are you o	or ha	ve you been a Reservist or member of the National Guard?		
	□ No.	Com	plete Form 122A-1. Do not submit this supplement.		
	☐ Yes.	Were	e you called to active duty or did you perform a homeland defense a	activit	y? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).
	□N	lo.	Complete Form 122A-1. Do not submit this supplement.		
	ΠY	es.	Check any one of the following categories that applies:		
			I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.	t :	If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, The Means Test does not apply now, and sign Part 3. Then
			I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on, which is fower than 540 days before I file this bankruptay again.	t a	submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The exclusion period means
			which is fewer than 540 days before I file this bankruptcy case. I am performing a homeland defense activity for at least 90 day	ا ا	the time you are on active duty or are performing a homeland defense activity, and for 540 days afterward. 11
		_		, 5.	U.S.C. § 707(b)(2)(D)(ii).
			I performed a homeland defense activity for at least 90 days, ending on, which is fewer than 540 days before file this bankruptcy case.		If your exclusion period ends before your case is closed, you may have to file an amended form later.

Official Form 122A-1Supp

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Middle District of Florida

What District of Florida								
ı re	Donald W. Cogswell		Case No.					
		Debtor(s)	Chapter	7				
	VEDI	FICATION OF CREDITOR	MATDIV					
	VERI	FICATION OF CREDITOR	WIATKIA					
abo	ove-named Debtor hereby verifies to	hat the attached list of creditors is true and c	orrect to the best	of his/her knowledge.				
ate:	June 29, 2018	/s/ Donald W. Cogswell						
		Donald W. Cogswell						
		Signature of Debtor						

Donald W. Cogswell 19864 Cobblestone Circle Venice, FL 34292-4184

Cavalry SPV I LLC 500 Summit Lake Drive STE 400

Valhalla, NY 10595

Chna

Discover Fin Svcs Llc Pob 15316 Wilmington, DE 19850

Christopher D. Smith Christopher D. Smith P.A. 5391 Lakewood Ranch Blvd N STE 203 Sioux Falls, SD 57117 Sarasota, FL 34240

Po Box 6497

Eric S. Olson, Esq. 9110 Strada Place Mercato - STE 6200 Naples, FL 34108-2938

Aargon Collection Agen 8668 Spring Mountain Rd Las Vegas, NV 89117

CC Collection Serv 8860 W Sunset Las Vegas, NV 89148 Florida Talk Radio, LLC c/o Bentley and Bruning, PA 783 S Orange Ave, STE 220 Sarasota, FL 34236

American Express P.o. Box 981537 El Paso, TX 79998

Charles E. Githler. III 1605 Main St #910 Sarasota, FL 34236

Genesis Communications I Inc. PO BOX 25434 Tampa, FL 33622

Bank of America Po Box 982238 El Paso, TX 79998

Chase Card Po Box 15298 Wilmington, DE 19850 Githler Development Inc. 1605 Main St #910 Sarasota, FL 34236

Bank of America, NA Po Box 982238 El Paso, TX 79998

Citi Po Box 6241 Sioux Falls, SD 57117 Hayt, Hayt & Landau 7765 SW 87th Ave Ste 101 Miami, FL 33173

BYL Service 301 Lacey St. West Chester, PA 19382 Citibank Na Attn: Bankruptcy Dept Po Box 20487 Kansas City, MO 64195 Invest Yourself, LLC c/o Robert Rinear 2736 Pursell Circle Sarasota, FL 34232

Calvary Portfolio Services Attn: Bankruptcy PO box 27288 Tempe, AZ 85285

Cooling & Winter LLC Melissa Alvarez, Esq. 7901 SW 6th Ct STE 310 Fort Lauderdale, FL 33324

IRS PO Box 7346 Philadelphia, PA 19101-7346

Capital One Bank USA NA PO Box 71083 Charlotte, NC 28281

David Bowman, Esq 2750 Ringling Blvd Ste 3 Sarasota, FL 34237

Kelley G. Price, Esq. Cohen & Grigsby, P.C. 9110 Strada PI Ste 6200 Naples, FL 34108-2396

Marta A. Grande 8874 Bloomfield Blvd. Sarasota, FL 34238 Pollack & Rosen, P.A. 806 Douglas Rd. STE 200 Coral Cables, FL 33134 Suntrust Bank Po Box 1438 Sarasota, FL 34230

Melissa Alvarez, Esq 7901 SW 6th Court STE 310 Fort Lauderdale, FL 33324 Portfolio Recovery Assoc 120 Corporate Blvd Ste 1 Norfolk, VA 23502 Synchrony Bank Attn: Bankruptcy Dept PO Box 965061 Orlando, FL 32896

Midland Funding 2365 Northside Dr STE 30 San Diego, CA 92108 Radiology Assoc of TPA PA PO Box 31265 Tampa, FL 33631-3265 Thomas Avrutis Esq PO Box 4137 Sarasota, FL 34230

Midland Funding 2635 Northside Dr STE 300 San Diego, CA 92108 Robert Rinear 2736 Pursell Circle Sarasota, FL 34232 Trey M. Desenberg PO Box 339 Sarasota, FL 34230

Modlin & Associates PA 1551 Sawgrass Corporate Pkcy STE 110 Sunrise, FL 33323 Sarasota Ellis Associates 7978 Cooper Creek Blvd. University Park, FL 34201 US Bank Home Mortgage 4801 Frederica St Owensboro, KY 42301

NV Energy PO Box 30150 Reno, NV 89520 Sarasota Memorial Hospital PO Box 863414 Orlando, FL 32886-3414 W. Andrew Clayton, Esq.Worth Graham, Esq.1 North Tuttle AveSarasota, FL 34237

Peter A. Wish 1444 Harbor Drive Sarasota, FL 34239 Southwest Gas Corporation PO Box 98512 Las Vegas, NV 89193-8512

Peter A. Wish as Trustee of the Peter A Wish Rev Trust 1444 Harbor Drive Sarasota, FL 34239 Spot Link LLC f/k/a Spot Link Inc. c/o Marta Grande - RA 401 Commercial Court Unit H Venice, FL 34292

Philip J. Grande 8874 Bloomfield Blvd. Sarasota, FL 34238 SPOT LINK, INC 1605 MAIN STREET - STE. 910 Sarasota, FL 34236 B2030 (Form 2030) (12/15)

United States Bankruptcy Court Middle District of Florida

In re	Donald W. Cogswell		Case N	0.	
		Debtor(s)	Chapte	r 7	
	DISCLOSURE OF COMPEN	NSATION OF ATTO	RNEY FOR	DEBTOR(S)	
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(ompensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation o	g of the petition in bankruptcy	y, or agreed to be p	aid to me, for service	
	For legal services, I have agreed to accept		\$	3,665.00	
	Prior to the filing of this statement I have received			3,665.00	
	Balance Due		\$	0.00	
2. \$	335.00 of the filing fee has been paid.				
3. T	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. T	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5. I	■ I have not agreed to share the above-disclosed compe	ensation with any other person	n unless they are m	embers and associate	es of my law firm.
[☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name				ny law firm. A
5. I	n return for the above-disclosed fee, I have agreed to rer	nder legal service for all aspe	cts of the bankrupto	ey case, including:	
b c	 Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of creditor [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hou 	ement of affairs and plan which rs and confirmation hearing, a educe to market value; eans as needed; preparatio	ch may be required; and any adjourned; cemption planni	nearings thereof;	nd filing of
7. E	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc from stay actions or any other adversary	chargeability actions, lie		judicial lien avoid	ances, relief
		CERTIFICATION			
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for	or payment to me for	or representation of the	ne debtor(s) in
Ju	ine 29, 2018	/s/ Christopher	D. Smith		
Da	ate	Christopher D. S			
		Signature of Attorn Christopher D. S			
		5391 Lakewood	Ranch Blvd N S	TE 203	
		Sarasota, FL 34 941-907-4774 F)	
		smith@ChrisSm			
		Name of law firm			